

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 14
FOR SE OF FORM 24/48

| | | | | | |
|--|--|---|--|--|--------------------------|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y | | | | | |
| Full Name (Last, First, Middle Initial) of Payee American Legion | | | Date M M / D D / Y Y Y Y Y Y Y Y 06 / 15 / 2012 | | |
| Mailing Address 4830 Hillegas Road | | | Amount 63.00 | | |
| City Fort Wayne | | State IN | Zip Code 46818 | | Transaction ID : SE.4308 |
| Purpose of Expenditure Facility Rental | | Category/ Type | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 25338.18 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | | |
| Full Name (Last, First, Middle Initial) of Payee Cancun Mexican Restaurant | | | Date M M / D D / Y Y Y Y Y Y Y Y 06 / 13 / 2012 | | |
| Mailing Address 1268 W. 86th Street | | | Amount 131.58 | | |
| City Indianapolis | | State IN | Zip Code 46260 | | Transaction ID : SE.4316 |
| Purpose of Expenditure Travel Expenses | | Category/ Type | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 24793.70 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... | | | 194.58 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (c) TOTAL Independent Expenditures..... | | | | | |
| <p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Sinclair Skinner</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 06 / 24 / 2012</p> | | | | | |

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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| | | | | | |
|--|--------------------|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y | | | | | |
| Full Name (Last, First, Middle Initial) of Payee Charlie Staples Bar-BQ | | | Date M M / D D / Y Y Y Y Y Y Y Y 06 / 18 / 2012 | | |
| Mailing Address 372 West Rayen Avenue | | | Amount 207.72 | | |
| City Youngstown | State OH | Zip Code 44502 | Transaction ID : SE.4347 | | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | |
| Calendar Year-To-Date Per Election for Office Sought 26556.82 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | | |
| Full Name (Last, First, Middle Initial) of Payee Chili's Trader Point | | | Date M M / D D / Y Y Y Y Y Y Y Y 06 / 14 / 2012 | | |
| Mailing Address 6020 West 86th Street | | | Amount 61.18 | | |
| City Indianapolis | State IN | Zip Code 46278 | Transaction ID : SE.4326 | | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | |
| Calendar Year-To-Date Per Election for Office Sought 25275.18 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... | | | 268.90 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (c) TOTAL Independent Expenditures..... | | | | | |
| <p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Sinclair Skinner</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 06 / 24 / 2012</p> | | | | | |

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Karriem Crawford-Muhammad

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 1540 Kingsway Road

Amount

500.00

City

Baltimore

State

MD

Zip Code

21218

Transaction ID : SE.4374

Purpose of Expenditure
Canvassing StipendCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

33898.16

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Rudy Lee Daniels

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 5925 Robindale Road

Amount

500.00

City

Baltimore

State

MD

Zip Code

21228

Transaction ID : SE.4372

Purpose of Expenditure
Canvassing StipendCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

33398.16

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1000.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

[Electronically Filed]

Date

M M M /

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Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Days Inn Ft. Wayne

Date

MM / DD / YYYY

Mailing Address 1161 W. Washington Center Road

Amount

City State Zip Code
Fort Wayne IN 46825

116.96

Transaction ID : SE.4313

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

25555.14

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Dish Network

Date

MM / DD / YYYY

Mailing Address 9601 South Meridian Boulevard

Amount

City State Zip Code
Englewood CO 80112

5.93

Transaction ID : SE.4305

Purpose of Expenditure
Communication ExpenseCategory/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

26090.15

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

122.89

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Dollar General Store | | | Date MM / DD / YYYY 06 / 14 / 2012 | |
| Mailing Address 420 East Center Road | | | Amount 57.07 | |
| City Kokomo | State IN | Zip Code 46902 | Transaction ID : SE.4302 | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 24933.24 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee ExxonMobile Middletown | | | Date MM / DD / YYYY 06 / 20 / 2012 | |
| Mailing Address 835 S Eisenhower Blvd. | | | Amount 242.28 | |
| City Middletown | State PA | Zip Code 17057 | Transaction ID : SE.4356 | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 27398.16 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | |
|---|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 299.35 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 24 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee ExxonMobile Sewickley | | | Date MM / DD / YYYY 06 / 19 / 2012 | |
| Mailing Address 2619 Wexford Bayne Road | | | Amount 250.00 | |
| City Sewickley | State PA | Zip Code 15143 | Transaction ID : SE.4344 | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 27006.40 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Family Dollar Store | | | Date MM / DD / YYYY 06 / 20 / 2012 | |
| Mailing Address 29 N 52nd Street | | | Amount 36.17 | |
| City Philadelphia | State PA | Zip Code 19139 | Transaction ID : SE.4350 | |
| Purpose of Expenditure Travel Expense | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 27042.57 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | |
|---|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 286.17 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 24 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

| | | | | | |
|--|--|--|---|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | | | | |

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee Giant Eagle Inc. | | | Date M M / D D / Y Y Y Y Y Y 06 / 19 / 2012 | | |
| Mailing Address 408 Penn Avenue | | | Amount 5.98 | | |
| City Wilksburg | State PA | Zip Code 15221 | Transaction ID : SE.4341 | | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | |
| Calendar Year-To-Date Per Election for Office Sought 26756.40 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | | |

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee Jermal Giles | | | Date M M / D D / Y Y Y Y Y Y 06 / 21 / 2012 | | |
| Mailing Address 5916 Harvey Street | | | Amount 500.00 | | |
| City East New Market | State MD | Zip Code 21631 | Transaction ID : SE.4370 | | |
| Purpose of Expenditure Canvassing Stipend | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | |
| Calendar Year-To-Date Per Election for Office Sought 32898.16 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | | |

| | |
|---|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 505.98 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
06 / 24 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report

New report

☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Homestead Inn

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 8520 NW Boulevard

Amount

280.76

City

Indianapolis

State

IN

Zip Code

46278

Transaction ID : SE.4319

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

25214.00

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Jeans Soul Food

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 730 Penn Avenue

Amount

113.31

City

Wilksburg

State

PA

Zip Code

15221

Transaction ID : SE.4353

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

27155.88

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

394.07

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

Signature

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Kayak Travel

Date

MM / DD / YYYY

Mailing Address 55 N. Water Street Suite 1

Amount

193.60

City State Zip Code
Norwalk CT 06854

Transaction ID : SE.4328

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

26750.42

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Da'Quan Lawrence

Date

MM / DD / YYYY

Mailing Address 8644 Binghamton Place

Amount

500.00

City State Zip Code
UPper Marlboro MD 20772

Transaction ID : SE.4365

Purpose of Expenditure
Canvassing StipendCategory/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

31898.16

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

693.60

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | |
|--|--------------------|---|---|
| Full Name (Last, First, Middle Initial) of Payee Lincoln Chapman Enterprises | | Date MM / DD / YYYY 06 / 15 / 2012 | |
| Mailing Address 1711 E Creighton Avenue | | Amount 111.82 | |
| City Fort Wayne | State IN | Zip Code 46803 | Transaction ID : SE.4331 |
| Purpose of Expenditure Facility Usage | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 25666.96 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | | | |
|---|--------------------|---|---|
| Full Name (Last, First, Middle Initial) of Payee Pilot Travel Center | | Date MM / DD / YYYY 06 / 15 / 2012 | |
| Mailing Address 7455 S State Road 13 | | Amount 191.28 | |
| City Pendleton | State IN | Zip Code 46064 | Transaction ID : SE.4334 |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 25858.24 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | |
|---|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 303.10 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

MM / DD / YYYY
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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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| | | | | | |
|--|--|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y | | | | | |
| Full Name (Last, First, Middle Initial) of Payee Timothy C. Pitts | | | Date M M / D D / Y Y Y Y Y Y Y Y 06 / 21 / 2012 | | |
| Mailing Address Pitts1530 Pentridge Road #202B | | | Amount 500.00 | | |
| City Baltimore State MD Zip Code 21239 | | Transaction ID : SE.4368 | | | |
| Purpose of Expenditure Canvassing Stipend | | Category/ Type | | Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 32398.16 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ | | |
| Full Name (Last, First, Middle Initial) of Payee Radio Shack | | | Date M M / D D / Y Y Y Y Y Y Y Y 06 / 22 / 2012 | | |
| Mailing Address 1505 North Dupont Highway | | | Amount 100.96 | | |
| City New Castle State DE Zip Code 19720 | | Transaction ID : SE.4360 | | | |
| Purpose of Expenditure Communciation Supplies | | Category/ Type | | Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 33999.12 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 600.96 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | | |
| <p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Sinclair Skinner</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 06 / 24 / 2012</p> | | | | | |

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Ruby's Kitchen | | | Date MM / DD / YYYY 06 / 16 / 2012 | |
| Mailing Address 4933 Dorr Street | | | Amount 225.98 | |
| City Toledo | State OH | Zip Code 43615 | Transaction ID : SE.4338 | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 26084.22 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Shore Stop | | | Date MM / DD / YYYY 06 / 22 / 2012 | |
| Mailing Address 1885 Bay Road | | | Amount 118.62 | |
| City Milford | State DE | Zip Code 19963 | Transaction ID : SE.4363 | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 34117.74 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | |
|---|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 344.60 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 24 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Sinclair Skinner

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 700 12th Street NW Suite 700

City

Washington

State

DC

Zip Code

20005

Amount

4000.00

Transaction ID : SE.4377

Purpose of Expenditure
Vehicle RentalCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

31398.16

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Speedway

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address P.O. Box 1500

City

Springfield

State

OH

Zip Code

45501

Amount

100.00

Transaction ID : SE.4310

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

25438.18

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

4100.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) 1911 UNITED | | FEC IDENTIFICATION NUMBER ▼ C C00508200 | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Travel Center of America | | | Date MM / DD / YYYY 06 / 18 / 2012 | |
| Mailing Address 5400 Seventy-Six Drive | | | Amount 258.95 | |
| City Youngstown | State OH | Zip Code 44515 | Transaction ID : SE.4322 | |
| Purpose of Expenditure Travel Expenses | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 26349.10 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | | | | |
|---|--------------------|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Marcus Neal Watts | | | Date MM / DD / YYYY 06 / 22 / 2012 | |
| Mailing Address 324 25th Street | | | Amount 500.00 | |
| City Baltimore | State MD | Zip Code 21218 | Transaction ID : SE.4379 | |
| Purpose of Expenditure Canvassing Stipend | | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 34617.74 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | |
|---|----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 758.95 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | 9873.15 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 24 / 2012